UTILITY Attorney Docket No. IND-38DIV PATENT APPLICATION James, IV, Benjamin First Inventor TRANSMITTAL OPTICAL FIBER INCLUDING A DIFFUSER PORTION AND Title CONTINUOUS SLEEVE FOR THE TRANSMISSION OF LIGHT (only for new nonprovisional applications under 37 CFR Express Mail Label No. ER 554 942 686 US 1.53(b)) ADDRESSED TO: Mail Stop Patent Application ⊃ APPLICATION ELEMENTS Commissioner for Patents See MPEP Chapter 600 concerning utility patent application P.O. Box 1450 contents. Alexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or 1. X Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 3. Specification [Total Pages 17] 8. Nucleotide and/or Amino Acid Sequence (Preferred arrangement set forth below) Submission (if applicable, all necessary) - Descriptive Title of the Invention a. Computer Readable Form (CRF) - Cross Reference to Related Applications b. Specification Sequence Listing on: - Statement Regarding Fed sponsored R&D i. CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a ii. 🔲 paper computer program listing appendix c. Statement verifying identity of above copies - Background of the Invention - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) 9. Assignment Papers (cover sheet & document(s)) - Detailed Description 10. 37 CFR 3.73(b) Statement Power of Attorney - Claim(s) (when there is an assignee) - Abstract of the Disclosure 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations 4. Drawing(s)(35 USC 113) [Total Sheets 2] 13. Preliminary Amendment 5. Oath or Declaration [Total Pages 4] 14. Return Receipt Postcard (MPEP 503) a. \(\subseteq \text{ Newly executed (original or copy)} \) (Should be specifically itemized) b. Copy from a prior application (37 CFR 1.63(d)) 15. ☐ Certified Copy of Priority Document(s) (for continuation/divisional with Box 18 completed) (if foreign priority is claimed) i. DELETION OF INVENTOR(S) 16. Request and Certifications under 35 U.S.C. 122 Signed statement attached deleting (b)(2)(B)(i). Applicant must attach form inventor(s) named in the prior application, PTO/SB/35 or its equivalent. see 37 CFR 1.63(d)(2) and 1.33(b). 17. Other 6. Application Data Sheet. See 37 CFR 1.76 18. X If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No 10/315,440 filed 12/10/02 which is a continuation of US application No. 09/785,571. Prior application information: Examiner Scott A. Knauss Group Art Unit: 2874 For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS ☑ Customer Number or Bar Code Label 000027777 or Correspondence Address below Philip S. Johnson, Esa. Name: Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Gerry S. Gressel at: Telephone: (513) 337-3535 (513) 337-8489 Fax: 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Reg. No. 34,342 NAME Gerry S. Gressel Da 3, 2000

SIGNATURE



13 146		Complete if Known		
46		Application Number		
	FEE TRANSMITTAL	Filing Date	December 2003	
SN		First Named Inventor	James, IV, Benjamin	
		Group Art Unit	4261	
PT0		Examiner Name	Scott A. Knauss	
0		Attorney Docket Number	IND 53DIV	

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	30 - 14= 16	0	x 18.00	\$770.00
INDEPENDENT CLAIMS	03 - 3 =	0	x 86.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$280.00	
		TOTAL FEES	\$ 770.00	

METHOD OF PAYMENT

- ☑ Please charge Deposit Account No. 10-0750/IND 38DIV/GSG in the amount of \$770.00.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/IND 38DIV/GSG. Three copies of this sheet are enclosed.

SUBMITTED E	Complete (if applicable)		
Typed or Printed Name	Gerry S. Gressel		Reg. No. 34,342
Signature	12 min	Date: December 3, 2003	Deposit Account No. 10-0750